

<i>SERFF Tracking Number:</i>	<i>HNVR-125273621</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Massachusetts Bay Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026000</i>
<i>Company Tracking Number:</i>	<i>GL-CW-07432-01F</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>GL Non-Adoption of ISO Multi-state Forms Revisions</i>		
<i>Project Name/Number:</i>	<i>GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F</i>		

Filing at a Glance

Companies: Massachusetts Bay Insurance Company, The Hanover Insurance Company, Hanover American Insurance Company

Product Name: GL Non-Adoption of ISO Multi- state Forms Revisions

TOI: 17.0 Other Liability - Claims Made/Occurrence

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: GL-CW-07432-01F

Filing Type: Form

SERFF Status: Closed

State Tr Num: AR-PC-07-026000

State Status:

Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding

Author: Sylvie Bosunga

Disposition Date: 09/07/2007

Date Submitted: 09/05/2007

Disposition Status: Approved

Effective Date Requested (New): 12/01/2007

Effective Date (New):

Effective Date Requested (Renewal): 12/01/2007

Effective Date (Renewal):

General Information

Project Name: GL Non-Adoption of ISO Multi-state Forms Revisions

Project Number: GL-CW-07432-01F

Reference Organization: ISO

Reference Title: 2007 GL Multistate Forms Revision

Filing Status Changed: 09/07/2007

State Status Changed: 09/05/2007

Corresponding Filing Tracking Number:

Filing Description:

Effective December 1, 2007, we wish to Non-Adopt the ISO 2007 General Liability Multi-State Forms Revisions as found in the following ISO Filing Designation Number:

Forms: GL-2006-OCTFR

Status of Filing in Domicile: Not Filed

Domicile Status Comments:

Reference Number: GL-2006-OCTFR

Advisory Org. Circular: LI-GL-2007-111

Deemer Date:

If you have any questions regarding this filing please feel free to contact this office.

Thank you for your time and attention.

<i>SERFF Tracking Number:</i>	<i>HNVR-125273621</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Massachusetts Bay Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026000</i>
<i>Company Tracking Number:</i>	<i>GL-CW-07432-01F</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>GL Non-Adoption of ISO Multi-state Forms Revisions</i>		
<i>Project Name/Number:</i>	<i>GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F</i>		

Company and Contact

Filing Contact Information

Sylvie Bosunga, State Filing Consultant	sbosunga@hanover.com
440 Lincoln Street	(508) 855-8136 [Phone]
Worcester, MA 01653	(508) 635-0703[FAX]

Filing Company Information

Massachusetts Bay Insurance Company	CoCode: 22306	State of Domicile: New Hampshire
440 Lincoln Street	Group Code: 88	Company Type: Property & Casualty
Worcester, MA 01653	Group Name: The Hanover Ins Group	State ID Number:
(508) 855-1000 ext. [Phone]	FEIN Number: 04-2217600	

The Hanover Insurance Company	CoCode: 22292	State of Domicile: New Hampshire
440 Lincoln Street	Group Code: 88	Company Type: Property & Casualty
Worcester, MA 01653	Group Name: The Hanover Ins Group	State ID Number:
(508) 855-1000 ext. [Phone]	FEIN Number: 13-5129825	

Hanover American Insurance Company	CoCode: 36064	State of Domicile: New Hampshire
440 Lincoln Street	Group Code: 88	Company Type: Property & Casualty
Worcester, MA 01653	Group Name: The Hanover Ins Group	State ID Number:
(508) 855-1000 ext. [Phone]	FEIN Number: 04-3063898	

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	
Per Company:	No

SERFF Tracking Number: *HNVR-125273621* *State:* *Arkansas*
First Filing Company: *Massachusetts Bay Insurance Company, ...* *State Tracking Number:* *AR-PC-07-026000*
Company Tracking Number: *GL-CW-07432-01F*
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *GL Non-Adoption of ISO Multi-state Forms Revisions*
Project Name/Number: *GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F*

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Hanover Insurance Company	\$0.00	09/05/2007	
Massachusetts Bay Insurance Company	\$0.00	09/05/2007	
Hanover American Insurance Company	\$0.00	09/05/2007	

SERFF Tracking Number: *HNVR-125273621* *State:* *Arkansas*
First Filing Company: *Massachusetts Bay Insurance Company, ...* *State Tracking Number:* *AR-PC-07-026000*
Company Tracking Number: *GL-CW-07432-01F*
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *GL Non-Adoption of ISO Multi-state Forms Revisions*
Project Name/Number: *GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F*

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	09/07/2007	09/07/2007

SERFF Tracking Number: HNVR-125273621 State: Arkansas
First Filing Company: Massachusetts Bay Insurance Company, ... State Tracking Number: AR-PC-07-026000
Company Tracking Number: GL-CW-07432-01F
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: GL Non-Adoption of ISO Multi-state Forms Revisions
Project Name/Number: GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F

Disposition

Disposition Date: 09/07/2007
Effective Date (New):
Effective Date (Renewal):
Status: Approved
Comment: Non- adoption approval.

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

SERFF Tracking Number: HNVN-125273621 State: Arkansas
First Filing Company: Massachusetts Bay Insurance Company, ... State Tracking Number: AR-PC-07-026000
Company Tracking Number: GL-CW-07432-01F
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: GL Non-Adoption of ISO Multi-state Forms Revisions
Project Name/Number: GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes

<i>SERFF Tracking Number:</i>	<i>HNVR-125273621</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Massachusetts Bay Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026000</i>
<i>Company Tracking Number:</i>	<i>GL-CW-07432-01F</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: HNVN-125273621 State: Arkansas
First Filing Company: Massachusetts Bay Insurance Company, ... State Tracking Number: AR-PC-07-026000
Company Tracking Number: GL-CW-07432-01F
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: GL Non-Adoption of ISO Multi-state Forms Revisions
Project Name/Number: GL Non-Adoption of ISO Multi-state Forms Revisions /GL-CW-07432-01F

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Approved	09/07/2007

Comments:

Attachment:

P&C Transmittal Document - Forms.pdf


Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only			
	a. Date the filing is received:			
	b. Analyst:			
	c. Disposition:			
	d. Date of disposition of the filing:			
	e. Effective date of filing:			
	New Business			
	Renewal Business			
	f. State Filing #:			
	g. SERFF Filing #:			
h. Subject Codes				

3. Group Name	The Hanover Insurance Group				Group NAIC #	0088
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
The Hanover Insurance Company	NH	22292	13-5129825			
Hanover American Insurance Company	NH	36064	04-3063898			
Massachusetts Bay Insurance Company	NH	22306	04-2217600			

5. Company Tracking Number	GL- CW- 07432-01
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Sylvie N. Bosunga 440 Lincoln Street Worcester MA 01653	State Filing Consultant	508-855-8136 Ext. 8136	508-635-0703	sbosunga@hanover.com
7. Signature of authorized filer				
8. Please print name of authorized filer	Sylvie N. Bosunga			

Filing Information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.0 Other Liability – Claims Made/Occurrence			
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability			
11. State Specific Product code(s) (if applicable) [See State Specific Requirements]				
12. Company Program Title (Marketing Title)				
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal X Other (give description) (Non- Adoption)			
14. Effective Date(s) Requested	New:	12/01/2007	Renewal:	12/01/2007
15. Reference Filing?	X Yes No			
16. Reference Organization (if applicable)	ISO			
17. Reference Organization # & Title	GL-2006-OCTFR & 2007 GL MULTISTATE Form Revision			
18. Company's Date of Filing	08/31/2007			
19. Status of filing in domicile	X Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	GL-CW—07432-01
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

Effective December 1, 2007, we wish to Non-Adopt the ISO 2007 General Liability Multi-State Forms Revisions as found in the following ISO Filing Designation Number:

Forms: GL-2006-OCTFR

If you have any questions regarding this filing please feel free to contact this office.
Thank you for your time and attention.

Very truly yours,



Sylvie N. Bosunga, CPCU
State Filing Consultant
Telephone: (508) 855-8136
Facsimile: (508) 635-0703
E-Mail: sbosunga@hanover.com

22.	Filing Fees (Filer must provide check # and fee amount if applicable.) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<p>Check #: N/A – fee exempt Amount: N/A</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)